

Ship April 17th

Work Order ID 158744

158744

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Thursday, March 30, 2017 3:38:54 PM

Item ID: D350-689-021 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Dual High-Back Seat Installation - Energy Attenuating Seat Compatible
 Start Date: 4/7/2017 Start Qty: 1.00 *1* Cust Item ID:
 Required Date: 4/17/2017 Req'd Qty: 1.00 *1* Customer:
 Reference: SCHEDULE/C

Approvals: Process Plan: YMF Date: 17-3-30 Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
IIN-D350-689	C								
100	Document Control	0.00							
100	DOCUMENT CONTROL								
DC	Memo	0.00							
Doc.Control -USB or Paperwork	Photocopy bluefile and create labels per PPP D350-689-021 CHG006								
110	Pick Kit	0.00							
110									
Packaging	Memo	0.00							
Packaging									
120	QC4- 100% Inspect kits for completeness	0.00							
120									
QC	Memo	0.03							
Quality Control									

APR 07 2017

APR 03 2017

APR 07 2017

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____		DISPOSITION Rework ☐ Scrap ☐ Use-as-is ☐ Suspected Unapproved ☐		AGAINST DEPARTMENT/PROCESS Skid-tube ☐ Machining ☐ Thermoforming ☐ Large Fab ☐ Cross tube ☐ Small Fab ☐ Finishing ☐ Composite ☐ Water Jet ☐ Prod. Eng. Coord. ☐ Rec/Store/Packaging ☐ Supplier ☐ Engineering ☐ Quality ☐ Other ☐					
Date :		Step #:		QTY Effective :			MRB (QSI042) Approval		
Description Work Order Deviation				Disposition				Completed By	
								Lead hand / Supervisor Approval Verification	
								QC / QA Coordinator Approval	
Root Cause		FAULT CATEGORY							
Environment ☐	No Re-verification ☐	Pressure/Forced ☐	Temperature/Cure ☐	Power Loss/Surge ☐	Positioned Wrong ☐				
Design ☐	Operator ☐	Bending ☐	Set-up ☐	Folio/Program ☐	Outside Dimensions ☐				
Doc/Data ☐	Offset/Setup ☐	Centre Not Concentric ☐	BOM/Route ☐	Grain ☐	Over/Under tolerance ☐				
Equip/Tooling ☐	Supplier ☐	Cracks ☐	Broken/Damage/Defect ☐	Weld ☐	Part Incorrect ☐				
Handling/Pre ☐	Training ☐	Crimp/Kink/Ripple/Wave ☐	Inspection Incomplete/Unqualified ☐	Wrong Stock Pulled ☐	Part Lost/Missing ☐				
Material ☐	Use for Testing ☐	Cuffs ☐	Contamination ☐	Out of Sequence ☐	Part Moved ☐				
Internal Transport ☐	Poor Information ☐	Crushing ☐	Countersink ☐	Off-set ☐	Drawing ☐				
Tribal Knowledge ☐	Rushing ☐	Heat Treat ☐	Cut Too Short ☐	Mislabeled ☐	Finish ☐				
LOA ☐	Product Improvement ☐	Wave/Twist in Tube ☐	Instructions Incomplete/Unclear ☐	Fit/Function ☐	Misread ☐				
Substation ☐	Process Improvement ☐	Marks/Chatter ☐	Drill Holes ☐	Misaligned/off center ☐	Turning Sequence ☐				
Past Expiry Date ☐	Manufacturing Process ☐	OTHER : _____							
Misidentified ☐	Past Due ☐								

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Item ID: D350-689-021 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
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Start Date: 4/7/2017 Start Qty: 1.00 ***1*** Cust Item ID:
Required Date: 4/17/2017 Req'd Qty: 1.00 ***1*** Customer:
Reference: SCHEDULE/C

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* Packaging Packaging	Packaging Memo Identify and pack for shipping as per PPP D350-689-021 Location: _____ PPP Rev: _____ <i>fg099</i>	0.00 0.00							<i>DAS</i> <i>27</i> <i>9-89</i> <i>APR 07 2017</i>
140 *140* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.10							<i>DAS</i> <i>21</i> <i>9-89</i> <i>APR 07 2017</i>

DAS
21
9-89
APR 07 2017

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework ☐ Scrap ☐ Use-as-is ☐ Suspected Unapproved ☐	AGAINST DEPARTMENT/PROCESS Skid-tube ☐ Machining ☐ Thermoforming ☐ Large Fab ☐ Cross tube ☐ Small Fab ☐ Finishing ☐ Composite ☐ Water Jet ☐ Prod. Eng. Coord. ☐ Rec/Store/Packaging ☐ Supplier ☐ Engineering ☐ Quality ☐ Other ☐			
Date : _____	Step #: _____	QTY Effective : _____		MRB (QSI042) Approval	
Description Work Order Deviation		Disposition		Completed By	
				Lead hand / Supervisor Approval Verification	
				QC / QA Coordinator Approval	
Root Cause		FAULT CATEGORY			
Environment ☐ Design ☐ Doc/Data ☐ Equip/Tooling ☐ Handling/Pre ☐ Material ☐ Internal Transport ☐ Tribal Knowledge ☐ LOA ☐ Substation ☐ Past Expiry Date ☐ Misidentified ☐ No Re-verification ☐ Operator ☐ Offset/Setup ☐ Supplier ☐ Training ☐ Use for Testing ☐ Poor Information ☐ Rushing ☐ Product Improvement ☐ Process Improvement ☐ Manufacturing Process ☐ Past Due ☐	Pressure/Forced ☐ Bending ☐ Centre Not Concentric ☐ Cracks ☐ Crimp/Kink/Ripple/Wave ☐ Cuffs ☐ Crushing ☐ Heat Treat ☐ Wave/Twist in Tube ☐ Marks/Chatter ☐ Temperature/Cure ☐ Set-up ☐ BOM/Route ☐ Broken/Damage/Defect ☐ Inspection Incomplete/Unqualified ☐ Contamination ☐ Countersink ☐ Cut Too Short ☐ Instructions Incomplete/Unclear ☐ Drill Holes ☐	Power Loss/Surge ☐ Folio/Program ☐ Grain ☐ Weld ☐ Wrong Stock Pulled ☐ Out of Sequence ☐ Off-set ☐ Misabeled ☐ Fit/Function ☐ Misaligned/off center ☐ Positioned Wrong ☐ Outside Dimensions ☐ Over/Under tolerance ☐ Part Incorrect ☐ Part Lost/Missing ☐ Part Moved ☐ Drawing ☐ Finish ☐ Misread ☐ Turning Sequence ☐			
OTHER : _____					

Picklist Print

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Work Order ID: 158744

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Parent Item: D350-689-021

D350-689-021

Parent Item Name: Dual High-Back Seat Installation - Energy Attenuating Seat Compatible

Start Date: 4/7/2017

Required Date: 4/17/2017

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A 08-12-23 new issue DD verified by: LL 08.12.24 IPP
Rev:B chg002 DD 10.02.12 verified by:JLM IPP Rev:C
chg004 DD 11.09.28 verified by:JLM IPP Rev:D 12.01.12
now @ CHG005 (ecn12-501) DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D350-689-023		Manufactured	No			110	Each	1.0000	1	1			
D350-689-023									**				
Floor Provisions Energy Attenuating Seat Compatible													
					<u>Location</u>			<u>Loc Qty</u>		<u>Loc Code</u>			
					FG027			1					
					155799			1					
D350-689-043		Manufactured	No			110	Each	0.0000	1	1			
D350-689-043									**				
Dual High Back Seat Assembly- Energy Attenuating Seat Compatible													
D3018-1		Manufactured	No			110	Each	3.0000	1	1			
D3018-1									**				
Seat Cushion													
					<u>Location</u>			<u>Loc Qty</u>		<u>Loc Code</u>			
					ST415			3					
					154482			1					
					156729			2					
D3019-1		Manufactured	No			110	Each	2.0000	1	1			
D3019-1									**				
Back Cushion													
					<u>Location</u>			<u>Loc Qty</u>		<u>Loc Code</u>			
					ST415			2					
					155435			2					

DQA: _____ Date: _____



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Root Cause				FAULT CATEGORY			
Environment ☐	No Re-verification ☐	Pressure/Forced ☐	Temperature/Cure ☐	Power Loss/Surge ☐	Positioned Wrong ☐		
Design ☐	Operator ☐	Bending ☐	Set-up ☐	Folio/Program ☐	Outside Dimensions ☐		
Doc/Data ☐	Offset/Setup ☐	Centre Not Concentric ☐	BOM/Route ☐	Grain ☐	Over/Under tolerance ☐		
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Material ☐	Use for Testing ☐	Cuffs ☐	Contamination ☐	Out of Sequence ☐	Part Moved ☐		
Internal Transport ☐	Poor Information ☐	Crushing ☐	Countersink ☐	Off-set ☐	Drawing ☐		
Tribal Knowledge ☐	Rushing ☐	Heat Treat ☐	Cut Too Short ☐	Mislabeled ☐	Finish ☐		
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Past Expiry Date ☐	Manufacturing Process ☐	OTHER : _____					
Misidentified ☐	Past Due ☐						

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Ship April 17th

Item ID: D350-689-021

Accept

N900040100

Setup Start *NS1*

Revision ID:

Item Name: Dual High-Back Seat Installation - Energy Attenuating Seat Compatible

Stop *NS2*

Start Date: 4/7/2017 **Start Qty:** 1.00 ***1***

Cust Item ID:

Required Date: 4/17/2017 **Req'd Qty:** 1.00 *** 1 ***

Customer:

Reference: SCHEDULE/C

Approvals: Process Plan: UMF Date: 17-3-30

Tooling:

Date:

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____

Date:

Stop *NR2*

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